### Case 1:07-cv-00913-RHW Document 1 Filed 07/02/07 Page 1 of 7

FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

# IN THE UNITED STATES DISTRICT COURT FOR THE SOUTHERN DISTRICT OF MISSISSIPP

SOUTHERN DISTRICT OF MISSISSIFM

M:	cheel	F. TADOET COMPLAINT	BY CT KOREL CLENK DEPUTY			
(Enter abo	ve the full na each plaintiff	me of the plaintiff or plaintiffs and prisoner in this action)	10121 CPHINI			
Har Per Dol Mr (Enter abo	ACK we the full na	V. EIVIL ACTION NUMBER:	be completed by the Court)			
		OTHER LAWSUITS FILED BY PLAINTIFF				
	_	NOTICE AND WARNING:  The plaintiff must fully complete the following questions. Failure to do so may result in your case being dismissed.				
Α.	Have yo	ou ever filed any other lawsuits in a court of the United States?	Yes ( ) No ( <b>X</b> )			
B.	If your answer to A is yes, complete the following information for each and every civil action and appeal filed by you. (If there is more than one action, complete the following information for the additional actions on the reverse side of this page or additional sheets of paper.)					
	1.	Parties to the action:				
	2. Court (if federal court, name the district; if state court, name the county):					
	3.	Docket Number:				
	4.	Name of judge to whom case was assigned:				
	5.	Disposition (for example: was the case dismissed? If so, what grounds? Very pending?):				

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(In item I below, place your name and prisoner num	ber in the first blank and place your present address in the second blank. Do the
same for additional plaintiff, if any).  I. Name of plaintiff:	Prisoner Number: 282768
	Son' H DC
Address: 10451 LACKIN S	78. 39503
employment in the third blank. Use the space belonderendants.)  II. Defendant: Deputy Sanitation  as Deputy Sanitation	It Detention Center
The plaintiff is responsible for providing the caddress(es) of each defendant(s). Therefore, the	ourt the name and address of each plaintiff(s) as well as the name(s) and plaintiff is required to complete the portion below:
PLAINTIFF(S):	
NAME: Michael F. TADDET	ADDRESS: W451 LACKIN SMITH Dr.
	GulfPort, MS. 39503
DEFENDANT(S):	
NAME: Perry Bartley	10451 LACKIN SMITH Dr. GUIFFORT, MS
Don CABANA MARK Mª GOW'N	10451 LACKIN SMITH Dr. GUIF Port, MS
(Apt. Rogers (Shief of H)	10451 LACKIN SMITH Dr. Guit Portins

## ATTACHMENT TO FORM TO BE USED BY PRISONERS IN FILING A COMPLAINT UNDER THE CIVIL RIGHTS ACT, 42 U.S.C. § 1983

A.	At the time of the incident complained of in this complaint, were you incare you had been convicted of a crime?	erated because
	Yes No <u>X</u>	
B.	If your answer to A. is yes, describe the conviction in the spaces below.	
	1. Name and location of court which entered the judgment of conviction	
	2. Date of judgment of conviction and the sentence received	
		i
	3. Date of the sentence	
52		
C.	Are you presently incorporated for a paralle on publishing of the control of the	
C.	Are you presently incarcerated for a parole or probation violation?  Yes No	
Đ.	If your answer to C. is yes, describe the parole or probation in the spaces	below.
	1. Date of your parole or probation	
	2. Date of your arrest for parole or probation violation	
	SIGNATURE OF PLAINTIFF	

### ADMINISTRATIVE REMEDIES PROGRAM

Α.	At the time of the incident complained of in this complaint, were you incarcerated because you had been convicted or		
	Yes (	)	No ( <b>X</b> )
В.	Are yo	ou prese	ently incarcerated for a parole or probation violation?
	Yes (	)	No (X)
C.	Did yo	ou prese	ent the facts relating to your complaint in the administrative or grievance procedure in your institution?
	Yes (	<b>X</b> )	No ( )
	1.	If yo	u answer to C is yes,
		ä:	State the date your claims were presented: 6-67
		<b>b</b> .	State how your claims were presented. (Written request, verbal request, request for forms)
			Inmate Grievance form
		g,	State the result of that procedure. (You must attach a copy of the final result, such as a certificate from the administrator of the Administrative Remedies Program stating that you have exhausted your administrative remedies.)
			I Am Sending Copys of my Grievance
			I have Exhausted my Grievance.
	2.	If you	have not filed a grievance, state the reasons:

#### STATEMENT OF CLAIM

of other persons involved, dates, and places. Do not gi	Describe how each defendant is involved. Also, include the names ve any legal arguments or cite any cases or statutes. If you intend to
need: attach autra cheet if necessary	rth each claim in a separate paragraph. (Use as much space as you
	mate Worker Michael Tanner
	er And fallow him I did AS I was
그리즘이 하다면 하면 보이고 있어요? 나타나가 하는 사람들은 병사가를 하는 것을 한 것을 하지 않았다.	him, We got to Central Control doorw
	n Central Control tower to open the
	re Standing in front of Central ho
1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	trustee I knew So I Went to
Talk to him, Well mr Bartle	y Started Screaming for me to
	re he was so I turned around
RE	LIEF
State what relief you seek from the court. Make no leg	al arguments. Cite no cases or statutes.
Compensatory Damages	
Pumitive Damages	
indirective Relief	
Signed this 27 day of June	, 20 O 7
	Michael F. Lanner
	Signature of plaintiff
I declare under penalty of perjury that the fores	going is true and correct.
(Date)	Muchow F. danner
	Signature of plaintiff

And Went back to Where he was Standing. AS I was walking past Mr. Bartley he Snatched the Case of Water off my Left Sholder And bottles of Water Went Flying out of the Case And one flew up And hit me in my Left eye. I went to find Shift Supervisor Capt. Phil Taylor (the Time of the Incident Was Around 7:00 to 8:00 am) the Mail Officer Was talking to the Work Center trustees Supervisor, I Asked her if She Knew Where Capt Taylor Was, She told me that Capt. Taylor Was not his boss that Capt. MACK MEGOWAN WAS h'S boss. SO I Went to CApt. Mesowars office told him About the Incident he got one of his officers to Escort me to medical. Medical Sent me to the hospital. the Emergency Room doctor Stated to me that it Don Cabana was cobvious to him that A blunt object has hit me in the eye I feel that my Left eye is permently damaged because before I got hit by that bottle I had really good vision Dow Every thing in when I Look

out of my Left Eye Every thing is Blurey.
The Medical Staff here Will not do nothing.
It Says in the Statement of Claims to discribe
howeach defendant is involved.

1 Don Cabana Warden: After Learning of Yiolation of my rights failed to remedy the wrong.

2 Mark Me Gowin: After Learning of Violation of my rights, failed to remedy the Wrong.

3 Capt. Redgers (Chief of Security) After Learning of Violation of my rights failed to remedy the Wrong.

THANK YOU,

Michael J. Lam